| | | | | | | | ì | | | | | |
|---|----------------------------------|---|-----------------|---|------------------|--------------|----------------|------------------------|-------|---------------------|------------------------|--|
| PATENT APPLICATION FEE DETERMINATION RECOR Effective October 1, 2000 | | | | | | | D 9883071 | | | | | |
| | | CLAIMS AS | (Column | | mn 2) | SMAL TYPE | | | OR. | OTHER SMALL! | | |
| TÇ | TAL CLAIMS | ' 3' | | | | RA | ξį | FEE: | | BATEN | WE S | |
| FC | R | | NUMBER F | NUMB | ER EXTRA | BASIC | | 355.00 | of | | $\mathcal{V}(0 0)$ | |
| 1.50 | ITĂL CHARGEA | BLE CLAIMS | 32 minus 20= 12 | | | XS | 9= | | | X\$18.5 | 216 | |
| | EPENDENT CL | | 5 minus 3 = 2 | | | X40 | <u>,</u> | | OR | X80= | (6) | |
| MÀ | ILTIPLE DEPENI | DENT CLAIM PF | RESENT | | | +13 | +135≐ | | OR | +270= | | |
| • # | the difference | in column 1 is i | ess than zer | ro, enter "0" in c | olumn 2 | TOT | AL | • | OR | TOTAL | 2 2 3 | |
| 3 | | LAIMS AS A | • • • | - PART II (Column 2) | (Column 3) | | -0. | NITY | roje. | OTHER SMALL | THAN NTITY | |
| MA | | CLAIMS . REMAINING . AFTER . AMENDMENT | | NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | RAT | | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| KONENT | Total | · 29 | Minus | • 32 | - Ø | X\$ | 9= | | ÖR | X\$18= | | |
| 層 | Independent | • 4 | Minus | 5. | · Ø | X44 | | | OR | X802 | | |
| L | FIRST PRESE | NTATION OF MU | JLTIPLE DEP | ENDENT CLAIM | للك | +13 | 5- | | OR | +270= | | |
| · + | 11 | | | | | ADDIT. |)TAL FEE | • : • | OR | TOTAL DOTT: FEE | | |
| | 10/6./05 | (Column 1) | | (Column 2) | (Column 3) | | ٠ | | | | 1 | |
| N E | | CLAIMS REMAINING AFTER AMENDMENT | | NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | RA | LE . | ADDI- TIONAL FEE | | RATÉ | ADDI- TIONAL FEE | |
| NOMENT | Total | . 25 | Minus | - 29 | | XS | 9= | | OR | X\$18= | | |
| 劉 | independent | • 4 | Minus | ··· 5 | • ~ | X44 |) - | | OR | X80= | | |
| F | FIRST PRESE | NTATION OF M | ULTIPLE DEP | ENDENT CLAIM | | +13 | 5 - | | OR | +270= | | |
| | | | | | | ADDIT. | STAL FEE | | OR | TOTAL ADDIT. FEE | | |
| | (Column 1) (Column 2) (Column 3) | | | | | | | | - ' | / | • | |
| DIMENT C | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | RA | TE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | • AMENDMENT | Minus | •• | 2 | XS | | | OR | X\$18= | 7 | |

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

Minus

FORM PTO-875 (Rev. 9/00)

Independent

OR

OR

X40=

+135=

X80=

+270=

OR ADDIT FEE

^{*} If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.